

Attorney's Docket No.: 14937.0(09
(Biogen Ref. A192/A2.1)

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled STRUCTURAL INTERACTION FINGERPRINT (SIF), the specification of which:

☐ is attached hereto.

☒ was filed on December 29, 2005 as Application Serial No. 10/562,974 and was amended on

☐ was described and claimed in PCT International Application No. _____, filed on _____ and as amended under PCT Article 19 on _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim the benefit under Title 35, United States Code, §119(e)(1) of any United States provisional application(s) listed below:

U.S. Serial No.	Filing Date	Status
60/484,308	07/03/2003	Expired
60/524,083	11/24/2003	Expired

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose all information I know to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56(a) which became available between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. Serial No.	Filing Date	Status
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I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

Country	Application No.	Filing Date	Priority Claimed
PCT	PCT/US2004/020992	07/01/2004	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Mey's Docket No.: A176 US 1002

Combined Declaration and Power of Attorney
Page 2 of 2 Pages

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

All Attorneys and Agents associated with

53063

PTO Customer Number

Direct all telephone calls to (Harold H. Fox) at telephone number (202) 429-3000.

Direct all correspondence to the following:

53063

PTO Customer Number

☒ For Assigned Inventions: I understand that the purpose of making this appointment is to permit prosecution of patent applications for the above-identified invention for the benefit of my assignee, and that this appointment does not create a personal attorney-client relationship between me and these appointees.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name of Inventor: Juswinder Singh

Inventor's Signature: _____

Residence Address: 94 Heritage Avenue, Ashland, MA 01721

Citizenship: United Kingdom

Post Office Address: 94 Heritage Avenue, Ashland, MA 01721

Date: 5/26/06

Full Name of Inventor: Claudio Chuaqui

Inventor's Signature: _____

Residence Address: 83 Menotomy Road, Arlington, MA 02476

Citizenship: Canadian

Post Office Address: 83 Menotomy Road, Arlington, MA 02476

Date: _____

Full Name of Inventor: Zhan Deng

Inventor's Signature: _____

Residence Address: 5 Sunset Road, Winchester, MA 01890

Citizenship: Canadian

Post Office Address: 5 Sunset Road, Winchester, MA 01890

Date: _____

ON THIS 26TH D. OF MAY, 2006, BEFORE ME, THE UNDERSIGNED
NOTARY PUBLIC, PERSONALLY APPEARED JUSWINDER SINGH PROVED TO ME
THROUGH SATISFACTORY EVIDENCE, OF IDENTIFICATION, WHICH WERE DRIVERS
LICENSE TO BE THE PERSON WHOSE NAME IS SIGNED ON THE
PRECEDING PAGE OF THIS DOCUMENT IN MY PRESENCE.



NOTARY PUBLIC

MY COMMISSION EXPIRES: MARCH 16, 2012



Attorney's Docket No.: 14937-0009
(Biogen A192 / A211)

Combined Declaration and Power of Attorney
Page 2 of 3 Pages

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

All Attorneys and Agents associated with

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Full Name of Inventor: Juswinder Singh

Inventor's Signature: _____ Date: _____
Residence Address: 94 Heritage Avenue, Ashland, Massachusetts 01721, United States
Citizenship: Great Britain
Post Office Address:

Full Name of Inventor: Claudio Chuagui

Inventor's Signature:  Date: June 30, 2006
Residence Address: 83 Menotomy Road, Arlington, Massachusetts 02476, United States
Citizenship: Canada
Post Office Address:

orney's Docket No.: 14937-0009
(Biogen A192 / A2 1)

Combined Declaration and Power of Attorney
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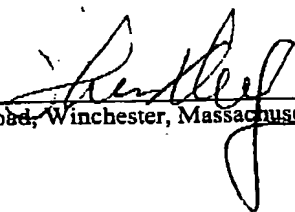
Full Name of Inventor: Zhan Deng

Inventor's Signature:

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5 Sunset Road, Winchester, Massachusetts 01890, United States
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Date: 06/22/2006